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representative or contact

PSNC accuse Mr Ennals of misleading MPs

Unichem claim biggest ever boost for **independents**

David Sharpe back in the ICML chair

A market viewpoint

NEW SERIES

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With this kind of success, we'll put a different complexion on your profits!

*Source AGB — TCPI volume figure for cold/cleansing sector September/October 1977.



Elida Gibbs **6** The brands that mean business.

CHEMISTO DRUGGIS

The newsweekly for pharmacy

21 January 1978 Vol 209 No 5101 119th year of publication ISSN 0009-3033

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21 January 1978

COMMENT

From chemists and

How far should the retail pharmacist expect manufacturers to go in providing him with insulation against the heat of the market place? Can he, in fact, afford to reject the products of the company which refuses to adopt a

'chemist-only' policy? We ask the questions because a C&D subscriber, reacting to the Sunglasses Supplement last week, sent us copies of correspondence he had had with the proprietors of one of the "big three" nationally advertised brands concerning their attitude to distribution. The subscriber pointed out that chemists take 62 per cent of sunglass sales, opticians and department stores each 13 per cent, Woolworths another 4 per cent—leaving only 9 per cent for all other outlets. Yet the supplier was to be found courting these "others"-Messrs W. H. Smith, to be precise.

The supplier replied that sunglasses were regarded as a dramatic growth market in which impulse plays a large part in sales. "We believe that chemists, including Boots, and departmental stores will continue to dominate the total market. It may mean that individual trade sectors may take slightly smaller percentage shares, but they will be selling more volume due to the increase in the total market." The supplier goes on to point out that it is brand advertising that has led to the market expansion—to the benefit of everyone involved.

This is a common attitude among manufacturers and, we regret having to admit, understandable in 1978. A decade and a half ago, chemists provided 15,000-plus outlets for a product; today that figure is below 11,000 and, frankly, in marketing terms many of the 11,000 should more correctly be classified as "department stores," since that is how they are seen by the customer. Indeed, to bolster up the number of "chemist" outlets to respectable numbers, some "chemist only" products are sold also through the "drug store"—there are marketing men who do not even know the difference, and both are lumped together in the Nielsen "chemist" index, for example.

Unfortunately it is difficult for the manufacturer of a mass-market product, heavily advertised and sold on price and availability, to justify sales restriction. With such products the chemist must fight other retailers on as equal terms as his professional constraints allow, and we thus welcome the latest promotional announcement from Unichem (p78) which is designed to give the independent chemist a fighting chance on nationally-advertised brands. As Peter Dodd, Unichem managing director, states-"Every independent retailer must recognise that he is living in a tough competitive world—to survive profitably, he must employ all the modern promotional techniques available to him." With their forthcoming campaign Unichem will push these "techniques" to a new levelthe response of other wholesale groups will be watched with interest and expectation.

But not everything that sells has to depend on outlet numbers more than quality of outlets, as is clearly spelled out in respect of Vichy on p87. It is surely in this type of market—where products require the pharmacist's expertise for their advancement—that the chemist may justifiably look for "exclusive" arrangements. For the 'impulse" line, it must be a matter of fighting for a share of sales large enough to ensure that the manufacturer caters for the chemist's special needs, in terms of pricing, special promotions, and point-of-sale material. That way, there can be gains on both swings and roundabouts.

Did statement to MPs 'mislead'?

The Pharmaceutical Services Negotiating Committee has criticised Mr David Ennals, Secretary for Social Services, for his reply to a Parliamentary question last week on the contractors' new system of payment.

PSNC believes the statement that he was making available £5 million to help smaller pharmacies (C&D, last week, p36) was "totally misleading" because he failed to mention he was depriving chemists of £17m by the end of 1978. The once-only payment of £5m for the specific benefit of certain small pharmacies would in no way answer the crisis facing pharmacy, PSNC says. It is estimated that £30m is needed to save the service from total collapse.

Mr Bob Worby, PSNC chairman, has written to all MPs giving them the true picture and offering to discuss the matter personally with them. On a BBC radio "Today" programme last week, he explained that one of pharmacists' main problems was their "grossly inadequate" return on capital invested. Since 1973 other Government contractors had had about a 40 per cent increase in capital employed whereas chemists were still at their 1973 level. The average retail business had to make about 6 per cent profit on turnover to be a going concern whereas chemists were only making about 2.8 per cent on turnover. When asked whether larger pharmacies would be in danger through having to contribute to the new scheme, Mr Worby said they would not necessarily face closure but would not be able to afford adequate stocks and their service to the public would be reduced.

A letter from Mr Worby explaining

the Secretary's "misleading statement" was published in *The Times* on Monday.

The number of signatories on the Parliamentary "early day" motion calling for more funds for community pharmacy had reached 173 by the time *C&D* went to press this week.

PSNC has received an acknowledgement from Mr Ennals for its letter setting out the grounds on which arbitration might be sought on the claim for an increased profit margin.

Pharmacy spending £642m for 1978-79

Spending in 1978-79 on the pharmaceutical services will amount to £642 million, of which £27m will be recouped in charges, according to a White Paper published last week. The corresponding figures for 1976-77 are £607m (£29m) and for 1977-78 £632m (£28m). The decrease in charges arises from increases in exempt categories.

The Government's Expenditure Plans 1978-79 to 1981-82 Vol II (Cmnd 7049-II, HM Stationery Office, £2.35) shows that spending on health and personal social services is to increase by about 2 per cent from £7,390m in 1977-78 to £7,537m in 1978-79. Expenditure for 1979-80, 1980-81 and 1981-82 is expected to be £7,652m, £7,776m and £7,927m. Expenditure on health services in 1976-77 was just under 1 per cent less in volume than planned in Cmnd 6721 (*C&D*, March 5, 1977, p277) mainly because the inflation rate was higher than expected when cash limits were set, the Paper says.

Mr Bob Worby, PSNC chairman, signing one of 600 letters to MPs on Monday



O.4 per cent of family budget on medicines

The average family expenditure on medicines and surgical goods per week during 1976 was 25p representing 0.4 per cent of the total £61.70 spent. The average net household income for the same period was £65.69, according to the Family Expenditure Survey 1976 (HM Stationery Office, £4.50) published last week. The pattern was little different from 1975.

Spending on toilet requisites, cosmetics etc. averaged 66p (1.1 per cent) and optical and photographic goods occupied 25p (0.4 per cent). Spending on those two groups of products rose approximately with the income of the household. Medicines and surgical goods expenditure, however, fluctuated between income groups.

Broken into quarterly periods medicines and surgical goods expenditure was fairly consistent. Toilet requisites and cosmetics, however, increased sharply during the fourth quarter whilst optical and photographic goods increased during the second and third quarters and fell back during the fourth.

Regionally the highest expenditure on medicines and surgical goods occurred in the south east (30p) and the lowest in Northern Ireland (17p). For toilet requisites, cosmetics etc, the south east gained the highest expenditure (72p) and Yorkshire, Humberside, north west, south west, and Wales the lowest (57p). For optical and photographic goods Greater London spent most (38p) and the north the least (14p).

Medicines and surgical goods include: NHS charges for prescriptions, appliances and spectacles; medicines, lotions, surgical goods. dressings and appliances (not NHS). Toilet requisites, cosmetics, etc include: cosmetics, toilet soap, toilet paper, shaving soap, razors, toothpaste, toothbrushes and hair brushes. Optical and photographic goods include: spectacles (not NHS), binoculars, microscopes, cameras, D&P charges and, studio photographs.

Chemists' sales in November

Retail sales by chemists and photographic goods dealers were 10 per cent higher during November, 1977, than in the same month the previous year, according to Department of Industry statistics. The new sales index for all chemists was 251 (1971=100) while that of all businesses was 255 an increase of 11 per cent. Independent pharmacies' sales rose 7 per cent to an index of 176 whereas independent retailers generally had an 8 per cent increase to 213. Figures for multiples and Co-operative societies are not given and NHS receipts are excluded.

'Chemist' stays in Unichem's new poster campaign

For their next major promotion Unichem have dropped the picture of a pharmacist in his shop and the word "prescriptions" from their poster advertising. The new poster—it will appear on over 80 key shopping sites nationally—this time concentrates on consumer competition and the words "local chemist" replace the legend "shop at your local private chemist." The final line on the old poster: "Issued in the interest of independent pharmacy by Unichem" also disappears.

The Pharmaceutical Society's Council took exception to the wording of the poster used in last autumn's campaign. (C&D September 3, 1977, p300) and discussions were held between Unichem and the Society. As a result, according to managing director Peter Dodd, the wording has been amended "in accordance with the wishes expressed by the Society". Details of the latest promotion (see p78) were given to the Society on December 9, 1977, and Unichem believe they have now taken "all reasonable steps to avoid offence". Unichem also say they have received very little opposition from their members over the previous poster—in fact 3,000 chemists gave their support to the promotion.

Dr Rogers rejects Clothier report

If the man in a country lane were asked where he would most easily get his medicine he would undoubtedly say, "at the same place and time that I get my prescription," which would obviously not be the local chemist, believes Dr Adrian Rogers, a dispensing doctor from Stratford-on-Avon. (Last year, Dr Rogers offended rural pharmacists with an article in the Sunday Times along similar lines).

In a letter to last week's British Medical Journal, he regrets that the Clothier Committee's report failed to answer the basic question as to who should have the right to dispense. "The original NHS regulations have certainly become outdated and fail to account for the packaging of most medicines and the excellent and improving record of general practitioner dispensing," he writes. "The little existing justification for the 'one-mile rule' has been overstated forcefully by the pharmacists in their bid to maintain an often unnecessary inconvenient, but lucrative service."

Dr Rogers feels a natural balance of supply and demand would result if doctors could dispense for patients who



Unichem's poster will be seen on 80 key sites throughout Britain

wished them to do so. Doctors had recently witnessed "unjustified attacks" on their right or ability to dispense or write prescriptions, which had led the Clothier Committee to maintain the present imperfect system.

"As long as large, powerful pressure groups meet to conceal the true nature of dispute there can be nothing but small concessions and postponement of issues and little genuine improvement in the Health Service," he adds.

A framework for rural progress?

The Norfolk Area Contractors Committee has accepted the report of the Clothier Committee on rural dispensing. Mr David Coleman, secretary, and a member of the Clothier Committee, stated that the Norfolk committee felt that the report provided a framework within which progress on rural dispensing could be made.

About 30 per cent of prescriptions handled in Norfolk were done by doctors and the Norfolk committee welcomed the semi-legal status of the National Joint Committee to which appeals, particularly over whether or not an area had ceased to be "rural in character," could be made. The committee felt it was essential to insist that option forms sent out by the Family Practitioner Committees should be signed by the patient if he wished to be included on a doctor's dispensing list.

Boots 'advertising' decision date

The Statutory Committee of the Pharmaceutical Society will deliver its postponed decision in the inquiry into complaints of "advertising" in Boo'ts diary and alleged use of the Society's coat of arms, on February 7 (C&D December 10, 1977, p868). The Committee will also commence five new inquiries, the hearings being scheduled for February 8 and 9.

C & D Medal for research into practice

The 1978 Chemist & Druggist Medal for Research will again be awarded for a contribution to the practice research session at the British Pharmaceutical Conference, University of Warwick, September 10-15.

The Medal, plus a monetary award (now worth £50), has been made annually at the Conference since 1971, originally to encourage first-time authors at the science sessions. In 1977 it was agreed that this award be given in future to the presenter of the paper which is judged to be of the best quality and presented in the best manner to the practice research session. The aim of this session is to encourage pharmacists to make a valuable contribution to the development of the profession by taking a positive interest in aspects of general practice—it is hoped that the award will provide an incentive towards this research.

Pharmacists engaged in any aspect of the profession may submit communications of original research; an increase to 1,200 in the maximum number of words permitted has been agreed this year. Submissions will be evaluated by an adjudicating panel and the authors of those topics accepted will be each given about 10 minutes to present the salient points of their research to the Conference, followed by 10 minutes of discussion. Financial assistance is available to young authors who are under 30, grant-aided and presenting a paper or communication to the Conference, or giving a scientific demonstration.

Communications should be submitted no later than May 25 and those intending to contribute are asked to apply for details to Mrs S. A. Henry, at the Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1 7JN, as soon as possible.

Return to ICML chair for David Sharpe

Mr David Sharpe has been appointed chairman of Independent Chemists Marketing Ltd. Mr Sharpe has been a member of the ICML board since it was founded in 1972 and was its first chairman. Mr Sharpe is also a member of the Pharmaceutical Society's Council, the National Pharmaceutical Association's board of management and the Pharmaceutical Services Negotiating Committee. Qualifying as a pharmacist in 1957, he owns a retail pharmacy in North London.

"I genuinely believe" he says "that the formation of the ICML/Numark scheme revolutionised chemists' whole-saling activities in the UK, to the benefit of both retail and wholesale chemists. Total independence under 'today's depressed and highly competitive trading conditions is a commodity we, as a profession, can ill afford."

Mr David Savory, a director of the main board of Macarthys Ltd, and who has served as a wholesaler representative on the ICML board since it was formed, has been appointed vice-chairman. The articles of association of ICML provide that the chairman is replaced every two years and that the position will alternate between a retailer and a wholesaler.

Self-poisoning doubles in Edinburgh

The annual number of admissions to Edinburgh Regional Poisoning Treatment Centre more than doubled between 1967-76.

According to an article in last week's *British Medical Journal*, benzodiazepines, barbiturates, tricyclic antidepressants, salicylates and paracetamol were the most common drugs encountered. It was the centre's policy to admit anyone over 12 years old who was thought to have deliberately taken more than the therapeutic dose of a drug or been exposed to any toxic compound; the annual number of admissions rose from 964 in 1967 to 2,134 in 1976.

The proportion taking barbiturate hypnotics declined from 30 per cent to 15 per cent while those who had taken benzodiazepines (mainly diazepam and to a lesser extent chlordiazepoxide and nitrazepam) increased to become the most common group (40 per cent). Admissions due to poisoning with tricyclic anti-depressants also increased, but relatively slowly. The use of salicylates for self poisoning is declining slowly, the article says, while paracetamol poisoning, uncommon in 1967, is now as frequent.



Mr David Sharpe

Society seeks 'transition' on script only

The Pharmaceutical Society is seeking a transitional period for the implementation of the Medicines Act Prescription Only List which comes into force on February 1. No length of period has been specified to the Department of Health although those pharmacists involved in agricultural and veterinary sales, who are most affected, would like sufficient time to clear their stocks.

The Society has no comments to make on proposed exemptions under the Medicines Act in respect of imports. The proposals, which had been considered by the Law Committee, would extend the exemptions, contained in Section 13 of the Act, that enable a doctor to import an unlicensed medicine for treatment of a particular patient. They would enable a stock of such unlicensed medicines to be imported by the owner of a retail pharmacy business or a wholesale dealer. No advertising would be permitted, the licensing authority would have to be notified on the first occasion, and written records of the importation, sale or supply would have to be maintained for inspection. The Committee considered those precautions to be adequate.

Fisons' prices held

The Price Commission has recommended that increases in the prices of Fisons' garden products should be limited to 20 per cent. According to a report, "Fisons agrochemical and horticultural products" (HC 151, HM Stationery Office, £0.55), published this week, the company had sought increases of up to 43 per cent. The Commission recommended to Mr Hattersley, Secretary for Prices and Consumer Protection, that the restriction should apply for 12 months from pre-notification ie until September, to protect the interest of consumers in a price-insensitive market.

More details of Poisons Act changes

Following implementation of certain sections of the Medicines Act 1968 on February 1, Parts II and III of the Pharmacy Poisons Act 1933 will be repealed on that date and the Poisons Act 1972 will come into force (C&D, January 14, p58). The 1972 Act deals only with non-medicinal poisons, and after February 1 poisons which have a wholly or mainly medicinal use, previously controlled under the 1933 Act, will be controlled under the Medicines Act.

A new Poisons List and amended Poisons Rules have been issued (SI 1978, No 2, HM Stationery Office £0.15 and SI 1978, No 1, £0.60, respectively). The main changes in both are the deletion of references to poisons that have no non-medicinal use.

As before, the Poisons List is divided into two parts. Part I consists of non-medicinal poisons which may only be sold by a person lawfully conducting a retail pharmacy business. Part II consists of non-medicinal poisons which may only be sold by a person lawfully conducting a retail pharmacy business or a person whose name is entered in a local authority's list.

Poisons to which special sales restrictions apply (concerning labelling, storage, records in poison book, and the purchaser must be known to the seller) are listed in Schedule 1 of the Poisons Rules. Exemptions from the restrictions are now provided for barium sulphate and articles containing barium carbonate or zinc phosphide for the destruction of rats or mice. Schedules 2 and 3 are similar in scope to those in the previous Poisons Rules (1972).

Schedules renumbered

The previous Schedule 4 dealt with medicinal poisons and has therefore been deleted. Subsequent Schedules have been re-numbered. The new Schedule sets out restrictions on sales by persons other than pharmacists on a local authority's list. Schedule 6 gives the wording of cautionary labels for various classes of poisons such as hair dyes containing aromatic diamines, as in previous Poisons Rules

Exemptions from the restrictions on the sale of strychnine, fluoroacetic acid, fluoroacetamide, arsenites, zinc phosphide and thallium salts are given in Schedule 12. Among them, strychnine may be supplied against a written authority from the Ministry of Agriculture, Fisheries and Food or the Department of Agriculture and Fisheries for Scotland for killing foxes (other than foxes held in captivity) in an infected area within the meaning of the Rabies (Control) Order 1974 (SI 1974, No 2212). The authority must have been issued within the preceding four weeks.

PEOPLE

Mr George H. J. Robinson, who at 56 retired early as chairman of Gillette Industries Ltd on January 1, has been elected president of the Institution of Works Managers. He began his career with Gillette in 1946 as a payroll accountant and, following promotion to various factory managerships he became managing director in 1966, chairman in 1967, and vice-president of the Gillette Co in 1970.

Deaths

Humphrey: On January 13, Senator Hubert Horatio Humphrey, former vicepresident of the USA. Senator Humphrey received a degree from the Denver College of Pharmacy, Colorado, in 1933 and helped in his father's pharmacy in South Dakota before resuming his political studies in 1937. He sought the Democratic party's nomination for presidency in 1960, 1968 and 1972, and in 1964 was elected as vice-president to Senator Johnson (1965-1968). He was elected an honorary member of the Pharmaceutical Society of Great Britain in 1967.

Robinson: Mr Philip Moffat Robinson, Rye Flatt, Brampton, Chesterfield, at the age of 95. He was formerly a director of Robinson & Sons Ltd and mayor of Chesterfield. He joined the family business in 1900 and became manager of the box works in 1913. From 1952 until he retired in 1954 he was vice-chairman.

News in brief

☐ Chemist contractors in England dispensed during October 24,463,657 prescriptions (15,039,944 forms) at a total cost of £47,682,514 (£1.95 per script).

☐ The Home Secretary has suspended, with effect from January 11, his previous direction prohibiting Dr Barbara Doris Ford, 1 Lych Way, Horsell, Woking, Surrey, from possessing, prescribing, administering, manufacturing, compounding and supplying, and from authorising the administration and supply of substances in paragraphs 1 to 5 of Part 1, Schedule 2 to the Misuse of Drugs Act 1971.

TOPICAL REFLECTIONS

by Xrayser

Unichem by three It would appear incredible that any wholesaler could increase sales

threefold in three years, even allowing for inflation. But such success, while remarkable in terms of organisation, is not so surprising when you look at the turnover breakdown of the average small pharmacy. Although the gross annual turnover may be over £50,000, retail sales amount to perhaps only half that, and it is probable that even of those sales half again are of items normally bought in twos and threes (say £6,000 to £8,000 at cost).

Membership of Unichem looks a good proposition, offering a commission or rebate of 6 per cent on all OTC purchases; it brings in about £400 with a further 5 per cent on a limited range of goods in original manufacturer's outers, making 11 per cent in all. This has to be compared with about 12½ per cent on a slightly wider range of maker's outers from Numark (with nothing on broken dozens), and 8 per cent from Sangers for those in the Apocaire scheme where virtually any OTC maker's outer is discountable. Vantage, too, offers much but would require almost 100 per cent allegiance for maximum benefit, I believe.

If what members tell me is correct it is Unichem's out-of-stock situation which has held back the increase to only 300 per cent. For myself, I think the smaller chemist owes a lot to the remarkable quality and variety of the services given by the wholesalers and I hope the "balance" is not shaken too greatly in the future.

Disposable

It had to come of course. The disposable toothbrush is here at last, and so cheap—only about 10p (two shillings!) each clean. I just can't wait to get my stock so that I can start competing with my local garage and our supermarket. And all those fifty sales a day from all those village stores in Lincolnshire! Gillette, too, are to follow Bic and Wilkinson into the disposable cut-throat business (safety of course) encouraging us with the bland statement "Chemists have the advantage of being able to specialise.'

Perhaps I have said enough to indicate "feeling" as opposed to more rational judgment. This feeling crystallised during the first Great Fuel Shortage a few years ago when I went down to the shop one Sunday afternoon with a friend who is both a naturalist and a fine artist. We looked at the products and packaging which forms the greater part of my retail turnover and concluded that if it were all to vapourise into nothing, the loss would only be felt by my bank account. He had just returned from a society where if a tin were washed up on the beach it would be treated as a valuable artifact to be used and re-used for years and years. So it's not surprising that he commented on the fact that since half the earth's finite fossil fuels have been destroyed within a span of perhaps three lifetimes (it will run out within another two), he found it hard to understand why the hydrocarbons were being burned or turned into non-recyclable materials to be dumped after brief use.

His conclusion was that not only are we poisoning our oceans and soil with products of our incredible ingenuity, but that the kind of comfort we enjoy is of a deeper immorality than the excesses of the Romans at the height of their power. They were living on the spoils of empire and the work of slaves. We are frittering away the inheritance of our own children, and their children unto the infinite generation and will be regretted as the too-clever fools of the Ages of Waste: In which our delectable disposable toothbrush has its place.

Good PR work . . . somewhere

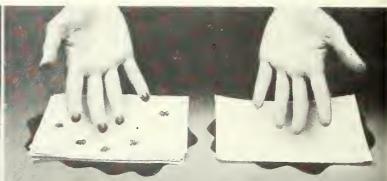
A customer in the shop today: "I see you won your fight to get better pay. Five million. Can't complain about that". Give me strength. I tried to explain. Minus eleven, plus five, equals minus six!

New because they set a new standard in hygiene.



SEX ORDINARY TISSUES ONE ZALGUARD TISSUE

1. A simple test with ink proves what ZALGUARDS ean do. The hand on the left presses down on 6 ordinary tissues laid on a blob of ink; the other hand presses down hard, with only one ZALGUARD as protection from the ink.



CONTAMINATION!

NO CONTAMINATION!

2. Now look! The hand on the left is contaminated; the hand on the right - no contamination! Imagine the ink was moist germ-earrying cold mucus or diarrhoca! ZALGUARDS is the barrier tissue that helps stop germs being handed around.

The spread of germs by 'touch transmission'

The illnesses which most commonly afflict families nowadays are probably gastro-intestinal infections and colds and influenza. And when one member of the family gets a tummy upset or a cold, the chances are the whole family will go down with it. Recent evidence suggests that germs can be passed round the family by 'touch transmission' - from hands contaminated by germ-carrying cold mucus or diarrhoea.

The world's first barrier tissue

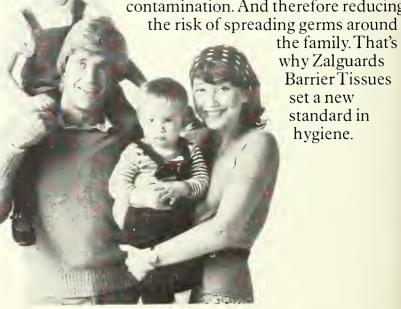


It is clearly important to avoid contamination of hands in the first place. But ordinary paper tissue is totally inadequate for stopping hand contamination. Zalguards, however, are different.

They are a highly effective barrier against moisture and germs. Between the soft tissue layers in

Zalguards, there's a delicate but strong layer that helps prevent the passage of germs and moisture - so protecting hands from contamination. And therefore reducing





GUARDS TISSUES.

ew because they open up a new area of profit.

reat new business opportunity

Zalguards provide a great new business ortunity since every sale of a cold or 'flu remedy nti-diarrhoeal treatment represents an oppority for the additional sale of a pack of Zalguards.

(In 1976, the number of prescriptions for anti-

(In 1976, the number of prescriptions for antirhoeal treatments and purchases of O.T.C. duct items totalled over 9 million, and cold and remedies provided by chemists came to a gering 65 million.)

ge advertising launch

NEW ZALGUARDS HELP STOP MMY BUGS AND COLD GERMS

Zalguards will receive tremendous sales port with an expenditure of £200,000 on national as and women's magazines advertising during the six months alone. This striking advertising apaign will ensure that brand awareness is very

rapidly established.
In addition, a full range of display materials has been designed to publicize Zalguards in-store.

Doctors in the area of your pharmacy will be involved directly in the promotional programme. They will be detailed with the advantages of Zalguards whenever a patient requires a consultation for a

cold or for diarrhoea. In this way it is anticipated that a number of people will be asking for Zalguards at the same time as they proffer their prescription. Actively displaying Zalguards at point-of-sale will therefore act as a crucial reminder to these customers.

Creating a new market

Zalguards is an entirely new concept in the fight against the spread of germs, going out to an entirely new and receptive audience. The market is new, the business is new and the profits are new.

Should you require further information on this outstanding business opportunity, please get in touch with your Sterling Health representative.



NEW ZALGUARDS.
HE BARRIER TISSUES FOR COLDS AND DIARRHOEA.

TRADE NEWS

Unichem claim biggest ever boost for the independent



Unichem, delighted with the response to their first major consumer promotion ("Spot the savings") last autumn, are about to launch what they describe as "the largest ever promotion in support of Britain's independent chemists.' Commencing March 1, it will involve national television, radio, daily newspapers and women's magazines, and a nationwide poster campaign.

The promotion has a "castaway prices" theme and features a consumer competition in which entrants have to match illustrations of five top-selling products with the names of the related manufacturers, and complete an appropriate tie-breaker. The products and "castaway prices" are ("normal" price in parenthesis): — Gold Cap SMA £0.82 (£0.93); Dr Whites sizes 1 (10) £0.26 $\frac{1}{2}$ (£0.33 $\frac{1}{2}$), size 2 £0.29 $\frac{1}{2}$ (£0.37 $\frac{1}{2}$); Colgate Dental Cream (large) £0.25 (£0.42); Radox bath salts (large) £0.34 (£0.52); Sunsilk hair spray (200g) £0.42 (£0.64). Some of these prices reflect increases in the pipeline.

Mr Peter Dodd, Unichem's managing director, believes the level of advertising and promotional support to be the highest ever offered exclusively to the independent chemist. A hard-hitting, mass audience television and radio campaign has been planned together with a substantial consumer Press campaign, concentrated in a five-day burst between March 4 and 10 in which full-page, fullcolour advertisements will appear in Woman and Woman's Weekly, and halfpage advertisements in the Daily Mirror, The Sun and Daily Record.

The main opening salvo in the promotion will be Unichem's first-ever consumer television commercial—a 30second film to be screened nationally at peak viewing times on two successive Sundays, March 5 and 12. The com-

mercial, estimated to have over 42 million "impacts", sets out brief details of the competition and prizes and also emphasises that shopping at the local chemist represents good value.

A week-long commercial radio campaign on 18 stations across the country will commence on March 6.

Unichem have also devised a national poster campaign to run during the promotion, in which 20×10 ft full-colour posters, sited in over 80 key shopping locations throughout England, Scotland and Wales, will tell shoppers how they can win the main competition prize.

Each Unichem pharmacist will receive a merchandising package including entry forms, two-colour form dispenser ("strutted" for easy counter mounting), full-colour window bill 20×30in showing the five promotion products and the top consumer prize, product cards, etc.

The winner of the competition—to be announced on May 16-will receive a fortnight's holiday for two in Tobago at a luxury hotel, plus spending money totalling £250. Other prizes include five portable colour television sets and 500 £2 vouchers redeemable at "Unichemists."

The prize for the Unichem member who served the winning consumer will be a "treasure chest" containing 20 gold sovereigns valued at around £600. There will also be five runner-up prizes for pharmacists of three gold sovereigns.

Last autumn's promotion was supported by 3,000 chemists and was open to all Unichem customers. This time it is "members only"-non-members will either have to join the society or pay a £30 advertising premium to participate. Peter Dodd told C&D he expects to run about three major promotions in 1978. Unichem Ltd, Crown House, London Road, Morden, Surrey.

Flexical phasing

While phasing out Flexical fruit punch flavour, Mead Johnson Laboratories are introducing a new 1lb (454g) pack of unflavoured Flexical elemental diet powder (£7.20 trade). Mead Johnson Laboratories, Stamford House, Langley, Slough.

Ronicol rationale

Roche are phasing out packs of 50 and 250 Ronicol tablets in preparation for the introduction of packs of 100. No credit will be given for any returns of stock of 50 and 250 packings. Roche Products Ltd, PO Box 8, Welwyn Garden City, Herts AL7 3AY.

Saridone tablets discontinued

Saridone tablets have been discontinued. Roche say that all available stocks have now been issued from their warehouse and ask that pharmacists use their existing stocks. For a further short period stocks may also remain available from local pharmaceutical wholesalers. Roche Products Ltd, PO Box 8, Welwyn Garden City, Herts AL7 3AY.

Dequadin coding

In continuation of plans to introduce the engraving of product names on tablet and lozenge preparations, Allen & Hanburys Ltd say that 20's packs of Dequadin lozenges issued after January 23 will contain lozenges engraved "Dequadin AH" around the perimeter of one side. The same change will be made to the 40's pack in due course. Allen & Hanbury's Ltd, Bethnal Green, London E2 6LA.

Kantrex injection temporary shortage

Bristol Laboratories are unable to supply Kantrex (kanamycin) injection 1.0g until June 1978 and apologise for any inconvenience this may cause. They have deleted both Tetrex PMT intramuscular and intravenous injections from their range. This deletion has immediate effect and the products will therefore no longer be available. Bristol Laboratories, Stamford House, Station Road, Langley, Slough SL3 6EB.

Another taste for Slender

Carnation are adding a chocolate malt flavour to the Slender range. The launch is timed to coincide with the initial 1978 television campaign which once again features Margi Campi. The company is also stressing to consumers that Slender can be made as a hot drink as well as cold, to keep slimmers warm in winter. Carnation Foods Co Ltd, 11 High Road, London N2 8AW.

Complan aims for younger image Farley Health Products are backing

Complan with their "biggest-ever" advertising campaign which gets under way this month. They are spending £250,000 on the campaign featuring a new commercial in a five week burst from January 23 in the London, Granada, Tyne Tees and Southern areas. Product manager, Tom Handley, says that the theme of the new commercial is to help create a younger image for the brand, "with a touch of the humour of family life".

An £18,000 radio campaign is also scheduled to begin this month in London, Liverpool and Manchester. New point of sale material is available. Farley Health Products Ltd, Torr Lane, Plymouth, Devon PL3 5UA.

Ampiclox Dry Cow

Ampiclox Dry Cow intramammary suspension (20 syringes, £5.90 trade) containing ampicillin 250mg and cloxacillin 500mg has been introduced by Beecham Animal Health for the routine treatment of cows at drying off. It eliminates the majority of existing infections and reduces the incidence of new infections including Streptococcus Agalactiae, penicillin-resistant and sensitive staphylococci, corynebacterium, E. Coli and other susceptible Gram negative bacteria. It is not to be used in lactating cows. Beecham Animal Health, Manor Royal, Crawley, West Sussex.

White Brevinor pack

Syntex Pharmaceuticals Ltd are phasing out the blue Brevinor oral contraceptive pack and replacing it with a white pack.

This packaging change is designed to differentiate clearly Brevinor packs from Norinyl-1 packs. Syntex Pharmaceuticals Ltd, St Ives House, Maidenhead, Berks.

Happy Birthday from Dr White's

Until February 17 consumers sending two pack fronts of either size of Dr White's looped towels to Lilia-White will receive a set of five birthday cards and envelopes. The cards are available in three designs—country scenes, floral and jungle friends. No limit is placed on the number of sets applied for, as long as the consumer supplies the required number of pack fronts. Lilia-White Ltd, Alum Rock Road, Birmingham B8 3DZ.

Stowaway support

Elida Gibbs are planning a number of specialised promotions on their range of Stowaway fragrances. There will also be range extensions and a new advertising campaign in 1978. The February issue of Look Now magazine will feature a Stowaway competition whose first prize is a two week holiday in Guadeloupe, in the Caribbean. Proof of a Stowaway purchase will provide the winner with



£200 spending money and as an added bonus she will model in the August fashion feature of Look Now.

The new advertisements which have been planned for the product will be appearing in magazines and on the radio. This campaign will provide backing for the two new Stowaway variants which are to be launched in April. Stowaway talc, previously only available in gift sets will become a standard item this year and purse sprays of the fragrance are being launched this month in a special promotion (£0.95). Elida Gibbs Ltd, PO Box 1DY, Portman Square, London WIA 1DY.

New Hansen size

A 60ml bottle of regular nail polish remover has been added to the Sally Hansen range (£0.29). Sally Hansen Ltd, PO Box 62A, Surbiton, Surrey.

More Trade News on p81

Non-ergotamine Migraleve is the one anti-migraine specific you may sell over the

Sales (and prescriptions) are still rapidly rising. So check your stocks now.

counter

Over half a million prescriptions for Migraleve have produced no adverse reports.

Migraleve



International Laboratories Ltd. Lincoln Way, Windmill Road, Sunbury-on-Thames, TW16 7HN.



Whenever Ayds are on TV sales leap ahead. So stock up now!

Take advantage of the biggest ever national TV campaign for Ayds starting on February 6th.

Contact your wholesaler today, or for further details contact Cuticura Laboratories on Maidenhead 23411.

GETAYDS ON VIEWAND THE TV WORK FOR YO

TRADE NEWS

Attwell mobile from Robinson's foods

Robinson's Baby Foods are offering a Mabel Lucie Attwell mobile to consumers sending ten packet tops from any of their baby foods or cereals, plus 12p postage. The offer is flashed on pack and is available while stocks last.



Last year, despite a sharp decline in baby foods generally, their brand share was up by 90 per cent in twelve months, and volume sales were up by 16 per cent. An advertising campaign is planned to appear in all the specialist baby magazines which will be backed up by a public relations programme both to mothers and health visitors. A display mobile to generate interest in this first promotion is available to retailers, and the offer is featured on the Baby Food one and two packs and on the back of Baby cereal packs. Reckitt & Colman food division, Carrow, Norwich NOR 7SA.

Fetherlite promotion

A counter display unit for Durex "Fetherlite" protectives has been introduced as part of an in-store promotion for the brand. The unit is a pillar pack which is said to combine a minimum amount of counter space with the largest possibly display facing for the product. Each unit holds two dozen 12-packs and four dozen 3-packs. Consumers will be offered one 12-pack for the price of ten sheaths, or two 3-packs for the price of five sheaths. Retailers will be able to purchase the display counter at a bonus price in order to sell at the lower promotional prices. As an additional incentive, mystery shoppers will be presenting Custom weekend cases to retailers who position the display alongside another Durex product. The promotion is scheduled to run until April.

LR/Sanitas have been awarded a certificate of commendation by the British Life Assurance Trust for Health Education for their film about contraception—"Responsibility". LR/Sanitas Ltd, Sanitas House, Stockwell Green, London SW9 9JJ.

Clearasil campaign

The first burst of television advertising for Clearasil cleansing lotion ends this week. The second burst will be seen in all regions excluding Ulster, Border and Channel, from March 12 to April 8. Richardson Merrell Ltd, Gerrard Place, East Gillibrands, Skelmersdale, Lancs.

Unichem offers

A number of products are on offer from Unichem between February 1 and 24: Angiers junior aspirin, Brut 33 hair control and shampoo, Cow & Gate Liga and Liga junior, Cussons Imperial Leather talc, orange, standard and blackcurrant Delrosa, Elastoplast Airstrip and stretch fabric, Eno fruit salt sachet, Feminax, Gillette two blade disposable razors, Super Silver blades and Techmatic cartridges, Johnson's dental floss waxed and unwaxed, KY jelly, Kotex Brevia, Soft'n Sure, Kwells, Lilia, Linco Beer shampoo, Macleans indigestion tablets and powders, Mum Rollette, Nice 'n Easy, Nulon, Right Guard, Rinstead pastilles, Soft & Gentle, Tegrin cream and lotion, Unichem nail polish remover, pastilles and linctus, Wella conditioners, Whistling Pops and Zubes.

Unichem's offers to members only for February include a 30 per cent discount on Arrid Extra Dry and $22\frac{1}{2}$ per cent off Palmolive soap. Other discounts available between February 1 and 24 are $17\frac{1}{2}$ per cent off Efferdent, $12\frac{1}{2}$ per cent off Elnett hairspray, 15 per cent off Kleenex, 20 per cent off Signal and $12\frac{1}{2}$ per cent off Tampax. Unichem Ltd, Crown House, Morden, Surrey.

PRESCRIPTION SPECIALITIES

Optimine tablets and syrup

Optimine is a potent antihistamine for hayfever and skin allergies demonstrated to cause only minimal sedation in controlled performance tests. It also has antiserotonin activity. Twice daily dosage is recommended.

Manufacturer: Warrick Pharmaceuticals Ltd., PO Box 400. Bracknell, Berks.

Description: White tablet scored on one side and "Schering Corporation USA" on other, containing 1 mg azatadine maleate. Orange coloured, blackcurrant flavoured syrup containing 0.5 mg azatadine maleate per 5 ml.

Indications: Symptomatic relief of allergic conditions such as hayfever, vasomotor rhinitis, urticaria, pruritus of allergic origin and allergic reactions associated with insect bites and stings. Contraindications: Not recommended for pregnant or lactating women. Caution with concurrent alcohol ingestion. May potentiate CNS depressants. Caution in mechanical operations requiring alertness until individual response determined. Due to anticholinergic effect, should be used with caution in prostatic hypertrophy, urinary retention, glaucoma, stenosing peptic ulcer or pyloroduodenal obstructions. Monoamine oxidase inhibitors should not be used concomitantly.

Dosage: Adults—1 mg morning and evening usually; 2 mg twice daily in more severe cases. Children—6-12 years—0.5 to 1 mg twice daily.

Side effects: Generally dose-related and transient. Include weakness, nervousness, dry mouth, increased appetite, anorexia, nausea, headache, drowsiness, dysuria and blurred vision.

Packs: Tablets 20 and 250 (£0.80, £8.75 trade), syrup 120 ml (£0.80 trade)
Supply restrictions: Prescription only

Issued: January 1978

Ganda eye drops

Manufacturer Smith & Nephew Ltd, Bessemer Road, Welwyn Garden City **Description** Clear, viscous, colourless liquid in a buffered isotonic solution supplied in a plastic bottle packed in a nitrogen-filled pouch: Ganda 3+0.5 contains guanethidine sulphate BP 3 per cent w/v and adrenaline BP 0.5 per cent w/v; Ganda 5+0.5, guanethidine sulphate BP 5 per cent w/v and adrenaline BP 0.5 per cent w/v; Ganda 5+1, guanethidine sulphate BP 5 per cent w/v and adrenaline BP 1 per cent Indications Reduces intra-ocular pressure; for primary open angle or secondary glaucoma. May be used with miotics or carbonic anhydrase inhibitors

Contraindications Narrow angle between iris and cornea

Method of use Adults—one drop once or twice daily or at physician's discretion; children—at physician's discretion **Precautions** When used with miotics Ganda should follow interval of 5-10 minutes

Side effects Occasionally orbital discomfort or red eye; rarely headache, irritation and local skin reactions; rare systemic effects include tachycardia, extrasystoles and blood pressure elevation; ptosis may represent an adverse effect but usually responds to dosage or frequency reduction; superficial punctate keratitis reported at prolonged high dosage responding to reduction or interruption of treatment

Storage Cool place away from strong light. Should not be used if dark amber. Potent for two years providing nitrogen pouch unopened; discard one month after removal from pouch. Should be supplied to patient with pouch intact

Dispensing diluent Not to be diluted **Packs** 7.5ml — 3+0.5 (£3 trade), 5+0.5 (£3.24 trade), 5+1 (£3.35 trade) **Supply restrictions** Pharmacy only **Issued** January 1978

NEW PRODUCTS

Uvitan and Uvicool join Uvistat

W B Pharmaceuticals Ltd have introduced two new products to the suntan market. While Uvistat will continue to be sold to would-be sun tanners with sensitive skin, Uvitan will now be available as well, for people whose skin is less sensitive—"for true sun worshippers". Uvitan (100g £1.70) contains aminobenzoic acid 1.65 per cent and an oil—a fatty ester with a branched alkyl chain—which helps prevent the skin from drying.

Uvicool (125g, £1.70) is an after sun lotion which soothes and moisturises. The company points out that the moisturising aspect is especially important if adequate towel drying is not carried out after swimming. The product is also said to have a cooling effect which makes it suitable for application before an evening's festivities after a day in the sun.

Like Uvistat and Uvistat L, both Uvitan and Uvicool will only be sold through chemists. Extensive advertising is planned for all products in both trade and consumer magazines, on television in two selected areas and in cinemas in the Greater London area. Bonus schemes will be available on the entire range. Stockists can have mixed orders of 13 invoiced as 12 for a minimum order of



four dozen, and 14 invoiced as 12 for minimum orders of 10 dozen. These terms are available during March and April.

Packaging for Uvitan echoes that of Uvistat, but with an ochre disc for Uvitan, instead of the orange for Uvistat, and a blue disc on the plastic bottle of Uvicool. This theme together with the copy line of "Uvitan for sun worshippers" will be carried through on the new point-of-sale material. W B Pharmaceuticals Ltd, PO Box 23, Bracknell, Berks RG12 4YS.

Effervescent multivitamins from Roche

Roche are launching a new OTC line, Redelan, an effervescent orangeflavoured multivitamin tablet which is taken as a drink. The company believes this unique presentation—an effervescent drink-will enable the product to compete in the convalescent and slimming markets, as well as the multivitamin sector. A pharmacy-only product, Redelan contains 10 vitamins and natural orange flavouring (10 tablets, £0.59). Women's magazine advertising worth £200,000 and starting March 1 will support the launch. An introductory offer will be available from the company's representatives. Roche Products Ltd, Broadwater Road, Welwyn Garden City, Herts.



Smooth neck bottle

William Freeman and Co Ltd, manufacturers of the Suba-Seal range of babycare products, have introduced an hygienic smoothneck feeding bottle to the range. The 8oz (250cc) bottle does not have the usual rim on the inside of the mouth to avoid trapping bacteria, it is made from glass-clear polycarbonate which is said to be virtually unbreakable and which can be sterilised by any method including boiling. A finger grip has been moulded into the design. The bottle is supplied in an individual carton complete with a teat cover and the choice of silicone rubber (£0.77), latex (£0.49) or moulded rubber teat (£0.49). William Freeman and Co Ltd, Suba-Seal Works, Staincross. Barnsley, South Yorkshire.

'No nonsense' cleanser

Optrex say that they have introduced natural witch hazel (£0.30) to fit a particular segment of the market where members of the public like "no-nonsense astringents and cleaners." Eye-catching packaging and point of sale material are being introduced to back this product which is currently available at a trial price of £0.25. Optrex Ltd, City Wall House, Basing View, Basingstoke, Hants.

Supersoft Softex

Bowater Scott have introduced "a new generation of supersoft toilet tissues" to the market. Softex (£0.29) has been launched in the London television area and is backed by a television advertising campaign carrying the theme that Softex is "so soft, you've got to squeeze it to believe it". As an introductory offer packs will be flashed with a 5p-off offer so that no pack should retail at more than £0.24 per double roll. Bowater Scott Corporation Ltd, Bowater House, 68 Knightsbridge, London SW1X 7LR.

Aramis moisturisers

Aramis have introduced three new products for men which are designed to keep their faces moisturised and wrinkle free. The company feel that it is a myth that men get better looking as they grow older and acquire "character lines" and say that they are "determined to save men from the obvious dangers of such unscientific and unfounded beliefs". The products are a moisturising after shave (£3.75), a moisturising concentrate (£4.25), and a moisturising hand and body lotion (£3.75). Aramis, 71 Grosvenor Street, London W1.

ON TV **NEXT WEEK**

Ln—London; M—Midlands; Lc—Lancashire; Y—Yorkshire; Sc—Scotland; WW—Wales and West; So—South; NE—North-east, A—Anglia; U—Ulster; We—Westward; B—Border; G—Grampian; E—Eireann; Cl—Channel Island.

Anadin: All except U, E Aspro Clear: All areas Atrixo: All except E, CI Contac 400: All except E Cream Silk: All areas Crest: All except G, E, CI Head & Shoulders: All except E Mac lozenges: Ln, M, WW, So, A, We Marigold gloves: Ln, M, Lc, Y, NE Night Nurse: All except E Odor-eaters: All except Ln

Poli-grip: All areas Rennie: Y, Sc, WW, NE, A, We, B, G

Signal: All areas SR: All areas

Sunsilk hairspray: All areas

Vaseline Intensive Care Iotion: All except U, E, CI

Vaseline petroleum jelly: All except U, E, C1

Vitarich: Lc



Halycitrol is the pleasant way to provide the family with its daily dose of vitamins A and D.

Children, particularly, will love its natural orange taste and Mum will have none of the problems she encounters when persuading them to take fish oil preparations.



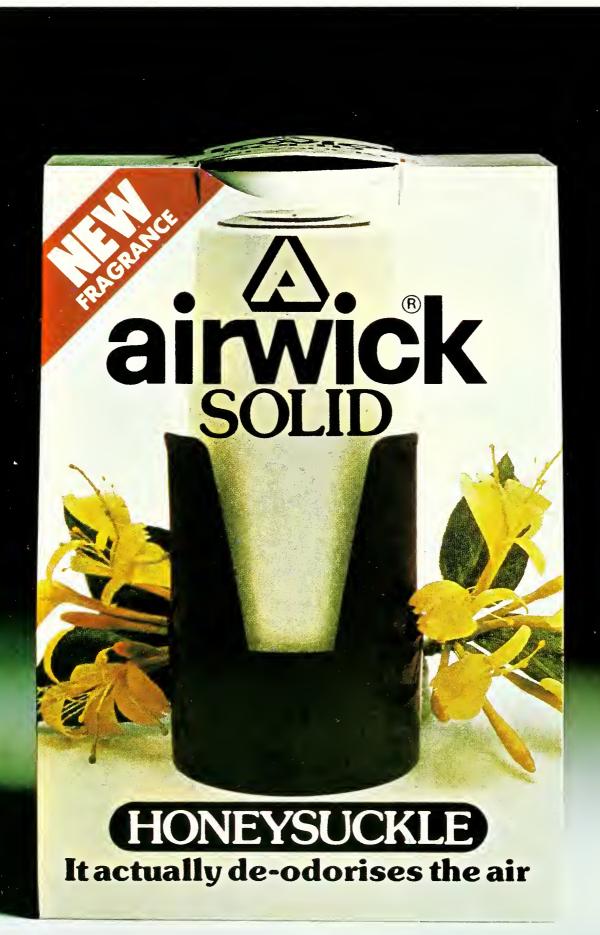
HALYCITROL is available in bottles of 114 ml Retail Selling Price 69p

For a healthy profit this winter order Halycitrol from your local wholesaler or direct from:

Laboratory for Applied Biology Limited 91 Amhurst Park. London N165DR *Trademark



Money



suckle.

THERE ELLER ELLER

From February to April, we'll be spending the national equivalent of 300,000 of these on TV and national women's press.

That's 300,000 very good reasons for stocking and displaying Airwick this spring.

airwick

After just one year, the world's No.1 suntan range is one of Britain's biggest sellers



At this rate the sky's the limit for '78. With extra Plough backing, nothing can hold you and Coppertone now. Just look what you get:

- *Bigger national advertising support
- *Bigger and better point-of-sale
- * Chance to win exciting summer prizes in Coppertone "Fun-in-Sun" Contest
- * Complete range to sell—includes UK market leaders QT and Sudden Tan.





See your Plough representative or contact Plough (UK) Ltd., Penarth Street, London S.E.15. Tel. 01-639 4363.

MARKET VIEWPOINT

Why an 'exclusive' skin care range

by F. A. Rundle, national sales manager, Vichy (UK) Ltd

This is the first of a new C&D series in which marketing executives will be invited to air their views and offer the retail pharmacist some timely advice on expanding his share of sales.

With retail pharmacy in its present plight, it is both apt and timely that Chemist and Druggist should bestow upon Vichy (UK) Ltd, the distinction of being the first company to contribute to this new series. For Vichy, the dominant skin care company selling to pharmacies in Europe, are the only company in the UK and Eire who market their high quality beauty products exclusively through pharmacies as a whole. This distribution policy has been followed by Vichy for thirty-five years in every country where their products are sold, for reasons that are very pertinent to the role pharmacy has to play in the skin care market.

The products are formulated by specialists such as biologists, dermatologists, physicists and chemists, and manufactured under the supervision of pharmacists to ensure maximum quality and efficiency in much the same controlled environment as for drugs. With millions of women regularly buying beauty products, every care is taken to ensure that the individual consumer is given the help and advice she needs in selecting the product right for her particular skin. Such advice can only come from an environment noted for its hygiene and

health—the pharmacy. Here she can be guided if necessary by fully qualified people before buying products to place on her skin. Such authority does not exist in a drug store nor a grocer, nor a cosmetic perfumery. If she needs to be aware of the ingredients of a particular product, she can check the packaging and gain more knowledge from the pharmacist himself.

Care of the skin in all its aspects is not just a cosmetic or beauty function. Skin care products are applied directly to the skin (a very sensitive, living organ of the body) and they may remain in contact with it for long periods. Skin care after all, is a serious business—not frivolity and certainly not to be sold like soap powder by grocer or market stall.

The skin care market itself is important and dynamic. Although relatively stable in 1977, it has been one of the fastest growing markets in recent years. According to government statistics, it is now the third biggest category in the whole cosmetics and toiletries field, behind only fragrances and hair preparations. It is bigger than toothpastes bigger than make-up, bigger than men's toiletries, bigger than shampoos.

By size alone (over £70,000,000 sales a



21 January 1978

year) the market presents real potential to the businessman chemist. In 1977, 64 per cent of all women were using a moisturiser (only 55 per cent in 1973), a figure amongst the highest of all product usage figures. However, in spite of the fact that this is a traditional chemists' field, it is well known that outlets other than chemists have been gaining market share at the expense of the chemist—as is the case in so many cosmetic and toiletry markets.

This story has a very familiar ring to it and is certainly not new to these pages. The reasons are complex but well known. However, it is in the skin care market that a way ahead may be found. For in one segment of this market the chemist remains dominant—acne treatment creams, 80 per cent of which are still bought from chemists. Here is a market in which the consumer spontaneously identifies her need with the pharmacy, where the "authority" of the pharmacy is almost a prerequisite to purchase. These products are a fitting garment to the professional pharmacist, and other, larger, more important segments of the total skin care market—cleansers, toners, skin foods, moisturisers and other face creams are equally appropriate.

Time to regain share

The climate is certainly right for a major attempt by retail pharmacists to try to regain lost shares in these categories. With environmental and life style factors causing more and more women to be aware of the need for proper daily care of the skin (to deal with minor or acute problems) the pharmacy can grasp this market and make it its own. With make-up usage figures dwindling, there is a clear shift towards skin care and away from skin decoration.

To say that retail pharmacy should capture this market is not to say that every chemist should don his cosmetic assistants' uniform. The opportunity which exists is one in which the chemist can underline the identity and distinguishing features of his pharmacy by focusing on those products which enhance the pharmacy. He may be unable totally to avoid the price-cutting cancer endemic to so many markets, but he can strengthen his professional standing in the High Street more in the field of skin care than in teddy bears and jewellery!

To implant in the consumer's mind that the place to buy products for care of the skin is the pharmacy should be every retail pharmacist's goal. He should promote those products which are appropriate to his education and training; he should seek out those products of undoubted quality, products which respect the consumer by being distributed through pharmacies only, which offer the best possible value for money, which are straightforward, and simple.

By doing this he will do much to enhance the image of retail pharmacy. But equally, he will help to arrest the alarming decline in market shares with which we are all familiar.

PROFESSIONAL NEWS

Pharmaceutical Society of Great Britain

Society seeks withdrawal from ABPI practice code

The Pharmaceutical Society is to ask the Association of the British Pharmaceutical Industry to delete any reference to consultation with the Society from its redrafted code of practice. The decision follows ABPI's failure to accept the Society's amendments to the text.

The Society had made comments on three clauses:—

☐ "The importance of such information [about medical products or related matters] and the existence of legitimate public interest in acquiring it may exceptionally justify holding a Press conference or the issue of a Press release. Invitations to attend such a conference, or the recipients of such a Press release, should be confined to persons who are either medically qualified or established as the representative of the medical or scientific Press, or as the medical correspondents of a responsible medium. In the circumstances set out above as to the significance of the information, and in response to an unsolicited inquiry from a person of the standing described, information may also be released in an informal manner.'

The Society recommended that it should include reference to persons pharmaceutically qualified.

"Information about a new medical product must not be released by Press conference or formal Press release until appropriate steps have been taken to inform the medical profession of its availability." The Society recommended that it should include reference to the pharmaceutical profession.

"No promotional material shall be issued unless the final text and layout have been certified by two persons on behalf of the member company in the manner provided by this clause. One of the two persons shall be a doctor. The other shall be a pharmacist or some other appropriately qualified person or a senior official of the company. Each must be a senior employee of the company or a qualified person whose services are retained for that purpose." The Society recommended that promotional material should be certified by three persons, instead of two as proposed, and should consist of a doctor, a pharmacist and a senior official of the company.

More 'open government'

Mr D. Dalglish said that for several years there had been a demand from the membership for more information about Council election candidates and for more "open government". Candidates should disclose all their business interests in their

biographies. In the past there had been complaints that candidates were not what they purported to be. He moved that for the 1978 and all subsequent elections all candidates should be required to disclose all their commercial interests in their personal biography sent to voters and published in the Society's journal.

Mr D. Sharpe asked did that mean that if he had a share in a newspaper shop he would have to declare that. Mr A. G. M. Madge asked whether it was fair to put the proposition forward without more discussion on the matter. The vice-president, Mr J. Balmford, considered it constituted such a fundamental change that the suggestion should be referred to the Organisation Committee. It could entail disclosure of confidential information, if, for example, a candidate was a consultant to a pharmaceutical company. Mr G. Walker pointed to the precedent by which Members of Parliament had to declare their interests. The secretary and registrar, Mr D. F. Lewis, asked if Mr Dalglish meant "all pharmaceutical commercial interests". Mr Dalglish replied that he meant all interests pertaining to pharmacy, that was, all gainful occupations.

Mr J. Kerr considered that Mr Dalglish had done a service for the Council by bringing the matter forward, but that he would do a disservice if he pushed it through too quickly. He asked could it be withdrawn on the condition that it would be discussed in the Organisation Committee. Mr Dalglish withdrew his proposal on that condition and Mr Stevens withdrew as seconder. Mr Balmford moved that the question of disclosure of commercial interests of Council candidates should be considered at the next meeting of the Organisation Committee, which was agreed.

Audiovisuals at BRM requested

Buckinghamshire Branch has asked to use audiovisual equipment at the branch representatives' meeting. Council agreed the idea could be put to the BRM in May but that, even if representatives agreed to it, it could not be implemented for this year's meeting.

Discussing the matter at Council, Mr Balmford pointed out that a resolution in favour of the use of audiovisual aids could only apply from 1979 onwards. Mr Kerr thought the request should not go to the BRM. If one branch was allowed such a facility, others would follow which

was the wrong way to go about political discussion. Mr R. Odd contended that a branch should be able to employ such equipment if it so wished. On some occasions slides could be misused, or were not needed, but they could be well used for the particular motion. Mr Walker thought the general feeling of the Committee had been that the BRM would reject the motion. Mr J. Bannerman emphasised that however responsible a branch might be, implementation of the proposal might lead to ridicule.

Professor A. Beckett said the use of slides might enable a motion to be put more effectively, but it would constitute a bias in favour of the person proposing the motion and be unfair to an opposer, thus affecting the right of reply. Supporting that, Mrs C. M. Puxon feared the proposal, if adopted, could open a wide door. If slides could be used, why not tapes, and after tapes, what next? It would make a nonsense of debate procedure.

Computers in pharmacy

A working party of five people is to be set up to consider computers in pharmacy, Council agreed. It was also agreed that the working party should comprise one member from general practice, one from hospital practice, one from industry, and one from academic service, all having special experience and knowledge about the application of computers, and that the chairman should be a member of Council.

There will be a pharmacy exhibition held concurrently with the 1978 British Pharmaceutical Conference in Coventry. Conference members will be provided with a handbook including conference and exhibition details and the cost would be met by selling its advertising space. The usual Conference programme will be placed in a pocket in the handbook.

Regulations to be made under Section 87 of the Medicines Act will require certain human and veterinary liquid medicines for external use to be packed in fluted bottles. The Regulations will not, however, apply to prescription only medicines as packed by manufacturers. Council was informed that it was the view of the Department of Health that manufacturers would pack such products in fluted bottles and thus facilitate original pack dispensing by the pharmacist.

Principles concerning hazard warning and drug recall procedures, suggested by the Hospital Pharmacists Group Committee, were considered by the general practice subcommittee. The subcommittee suggested additional principles and recommended that a letter setting out the final list of points should be sent to the Committee on Safety of Medicines and that was agreed by Council. Among the points are that the Department of Health is responsible for informing pharmacists of all hazard warnings and drug recalls, either by direct notice or after approval of any notices sent from manufacturers; that area and regional pharmaceutical officers should be informed as a matter

Continued on p90

Our Pension Plan for the self-employed. You don't have to retire to enjoy it.

There's nothing particularly astute about putting money aside for when you're old and grey.

It's just plain common sense. Especially if you work for yourself.

The skill comes in finding a way of providing for your retirement without paying out a fortune now.

> One way is with our Personal Pension Plan. You can get total tax relief – both basic and



higher rate – on your contributions, subject to generous maximum limits.

Investment income accumulates free of UK income tax and there's no liability to capital gains tax.

You can choose to take out a tax free lump sum when you retire.

And your pension will normally be taxed as earned income, not investment income.

But while you may relish the thought of saving tax, the prospect of committing yourself to long-term contributions may appeal to you rather less.

After all, being your own boss can sometimes seem a risky business.

You shouldn't be deterred. Our plan is flexible enough to let you keep your options open.

So long as you keep to the minimum of $f_{1}100$ a year or $f_{1}10$ a month, you can pay in as much, or as little, as you can afford each month. You can even stop making payments altogether for a time, and start again later.

At the moment, of course, retirement is probably the last thing on your mind. You don't

know whether you'll be retiring at 60 or soldiering on to a ripe old age. It doesn't matter. You can start to draw your pension at any age between 60 and 75, and there's no need to choose the starting date in advance.

In fact, there's only one decision you have to make now.

Whether you want to pay less tax during your working life, and look forward to your pension on retirement.

Or whether you want to keep on subsidising the Exchequer, then struggle through retirement on the Old Age pension and a free bus pass.

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	ny Limited, Juxon House, 94 St. Paul's Chu n EC4M 8EH. Tel. 01-248 9155.	renyara,

BARCLAYS UNICORN GROUP

Fees scale redrafted

Continued from p88

of routine of all notifications dispatched; and that all general practice pharmacies should be warned unless the warning concerned a product which was available to hospitals only.

The Society is submitting to the Price Commission a re-drafted scale for pricing private prescriptions and counter-prescribed medicines. That was recommended by the general practice subcommittee and agreed by Council. It was also agreed that the scale should apply to emergency supplies made under the Medicines (Prescription Only) Order 1977.

A booklet setting out the advantages to the public of consulting a pharmacist and being in possession of a well-stocked medicine cabinet was being prepared by a firm of publishers, it was reported to the general practice subcommittee. The booklet would be available for free circulation from pharmacies. A leaflet was also being produced on the same subject, and that might be ready for distribution in February. Both booklet and leaflet would contain editorial matter and advertisements and were being sponsored by several major manufacturing companies. The subcommittee recommended, and Council agreed, that the publisher should be advised that the Society was sympathetic to its aims and that it should be asked to submit draft material for

The Society would be prepared to consider acting as a central authority for the monitoring of adverse drug reactions, the Department of Health is to be informed. It was also agreed that the British Medical Association and the Association of the British Pharmaceutical Industry should be informed of the Society's approach to the Department so that detailed discussions could be entered into if necessary.

Patient information

A meeting last December between representatives of the Society, the British Medical Association and the British Dental Association (C&D, December 17, 1977, p882) was reported to the Practice Committee. The Committee was told that the meeting had agreed that additional information to patients should be largely by additional labelling rather than by distribution of leaflets. It had also proposed that a working party should be set up between the BMA and the Society to prepare and evaluate a pilot scheme based on that already used Buckinghamshire Area Health Authority.

However, the Committee was told that the Department of Health was under pressure to hold a larger meeting on the subject, at which consumer organisations

would be represented, and would probably not be prepared to delay that meeting to wait for detailed proposals. The Committee recommended, therefore, that the Department should be informed of the views agreed at the December meeting and the Society's proposal. The Society would inform the BMA it was recommending to the Department that a meeting should consider the provision of information to patients, and it would also inform both the BMA and the Department that it would recommend the inclusion of a consumer representative on any working party set up. It was also agreed that the ABPI should be

Oral contraceptive training

An outline syllabus of the training which pharmacists might be required to undertake before they would be competent to prescribe oral contraceptives was prepared by the Science Committee, as suggested by the general practice subcommittee. Council agreed that the Education Committee be asked to consider the syllabus and estimate the length of time necessary to cover it on a postgraduate study basis.

The Society's views on the control of instruments for the measurement of blood pressure are to be sent to the BMA. Council feels it should be suggested to the Medicines Commission that because of the number of portable instruments coming on to the market they should be licensed and a suitable body asked to draw up standards for the control of their accuracy, suitability and reliability. Council also considered that the availability of the instruments, when used in a screening service offered to the general public, should be limited so that their use could be supervised by suitably qualified persons, and that the way in which the service was advertised should also be controlled.

Should the administrative head of each school of pharmacy be invited to the annual meeting of heads of schools of pharmacy, whether or not he was a pharmacist? That question was considered by the Education Committee. Rotating headships had been introduced in a number of institutions, and whoever occupied such a post at any particular time had full responsibility for the school at that time. The Committee also discussed the relationship that should exist between the Society and the school for the approval of pharmacy degrees. The Committee considered that the Society should not recognise the position of non-pharmacist heads of schools but that should those persons wish to attend the meetings and be a contact with the Society, it was important that the Society also had a direct contact with a senior pharmacist responsible for the professional aspects of the course.

It was appreciated that that could produce a delicate situation within a school and it was agreed that detailed proposals should be considered at the next meeting. Mr Balmford thought it a retrograde step to bring non-pharmacist heads of school to the meeting. It did not encourage young graduates with a pharmacy degree to become members of the Society if a non-pharmacist was recognised as being of equal status. Mr Bannerman stated the Committee did not want to create divisions in the schools, but to obtain improved overall control. A formal recommendation would be put forward in due course.

Mr C. C. B. Stevens, declaring he would vote against such a recommendation, said no medical school would have a head who was not a doctor. Professor Beckett said it was inescapable that a system of rotating headships would result in there being heads who were non-pharmacists. Mr Kerr moved that the suggested paper be prepared for submission to Council in February, and that no action be taken by the Committee in the meantime. The motion was carried.

The amount of experience in dispensing in degree courses appeared to be reaching a dangerously low level, according to one district pharmaceutical officer, the Education Committee heard. It was resolved that the next meeting of heads of schools of pharmacy, on November 14, should be asked to discuss the matter.

Advertising

A warning letter is to be sent to a pharmacy company and its superintendent pharmacist concerning an article and advertisements for the pharmacy that had appeared in a free local newspaper. The Ethics Committee noted that the newspaper concerned had confirmed that the pharmacist had asked to see the editorial matter but had been refused. The Committee was informed that the Statutory Committee had in the past taken the view that if a newspaper objected to supplying a proof copy then it was open to the advertiser not to place the advertisement. It had been made clear in previous decisions of the Statutory Committee that the responsibility rested with the pharmacist concerned.

The Privy Council had approved alterations to the Society's Byelaws dealing with the Adjudicating Committee, the Scottish Department, and the Welsh Executive, the secretary and registrar reported, Dr H. Nicholson has resigned as a Privy Council nominee member of the Council, reported Mr Lewis. Dr Nicholson was appointed to Council in May, 1977, in place of Professor Paul Turner, initially to serve for the remainder of the period for which Professor Turner was appointed.

The fund of money subscribed to commemorate the late F. W. Adams (secretary and registrar of the Society from 1949 to 1967) should be used to provide furniture for the ante-room to the Council dining room, on the fifth floor of the Society's House. That was recommended by the Finance and General Purposes Committee and agreed by Council. A plaque will be placed on the wall of the room to that effect.

LETTERS

Clothier: no longer our own masters

My sympathy for Graham Walker is real and sincere, and one would suppose that a pharmacist so affected by having ten dispensing doctors on his door step would be a good choice to represent rural pharmacists—but I wonder whether in fact his perilous situation makes him a poor advocate.

He asks whether it is realistic to expect doctors to give up their legal recognition. But Clothier is going to deprive us of being masters in our own profession. "Is it realistic to expect doctors to give up the income they have filched from their pharmaceutical colleagues?" he asks. "Is it realistic that pharmacists should give up their professional income to their medical colleagues?" I ask.

As a negotiator I would expect doctors to cling to what they have got, until some alternative is offered to them, and it must be obvious to all that the argument is about money, and some sort of cash element must be introduced into the argument.

Point of principle

I have seen Graham Walker at contractors conferences speaking on various topics. He has struck me as a forceful, clear-headed individual, but in this instance I feel his arguments are weak and very unpalatable. The Clothier report—should it be accepted—strips us of all our clothes; we have no negotiating position. Graham Walker has already told us to accept it. The GPs are already digging in against it. If we give way on points of principle at this stage our future position will be very perilous indeed.

Graham Walker asks us in his penultimate paragraph if a campaign (against dispensing doctors) will bring us any nearer to pharmacy dispensing for all patients. He may be right in his assertion, but surely accepting Clothier as it stands only strengthens the doctors' hold on what rightly should be our stronghold. In the whole of the Clothier report, the dispensing doctors have not budged an inch from their pre-Clothier position.

Graham Walker's final paragraph is nonsense judged by any standards. With warts, flaws (and our negotiators) we are asked to accept on balance the Clothier report—not mark you as a permanent solution, but as a beginning of a long term rearrangement of dispensing. I may be wrong, but that is what I thought the Clothier report was supposed to do. Any results like Clothier from another inquiry, and our professional impact will disappear like swan's down in a gale.

The Clothier standstill is one thing, but the Clothier report is a different kettle of fish altogether. Let us not commit ourselves to anything in the report which deprives us of our professional

rights, or sets a precedent which would only strengthen the hand of dispensing doctors in any future negotiations.

It strikes me as preposterous that the basis for professional rights should be not what is best for the profession or for the patient, but actually what money doctors can make by depriving their professional colleagues of their natural income. It would seem to me that if the medical profession had its poorly paid rural general practitioners at heart, they would seek to solve the problem, as did the PSNC for the small essential pharmacies. The rural GP may be poorly paid: if so it must surely be reasonable to suggest that the medical profession seek ways of helping their colleagues other than robbing the rural pharmacist of their professional duties and rightful income.

Stanley Bubb from Dorset must be voicing the opinion of the majority of pharmacists when he tells us it will be suicide to accept the report. Our MPs should be told that it is not acceptable, and that we are not willing to barter our professional recognition or standards in order that underpaid general practitioners should be able to maintain their standards of living. What we must do as a profession is to back any plan which will reimburse the rural general practitioner for his professional work, providing it is not at the cost of our professional honour or our own professional remuneration.

I think Clothier started from the wrong premise. It would surely be a good starting point to say that both pharmaceutical and medical colleagues get together to ensure that payment for services be adequate. Clothier or his successor should start with the suggestion that a pharmaceutical service be made available throughout the land. Where this is clearly not possible some form of agreement could be reached for looking after hardship cases.

It surely must be our aim to reduce the bitterness that has existed over the years between the two professions in our rural communities. This can best be done by two professions fighting for each other's benefits. We must back the rural medical practitioner in his demands for better payment, and they must back our aim for as full and comprehensive a pharmaceutical service as it is possible to give. If we can use these two aims as our starting point in any future inquiry, the running sore that has bedevilled the two professions for a quarter of a century could be cured over night.

John Davies
Wiveliscombe, Somerset

Give it a chance

Like Mr Bubb last week, I too am depressed after 37 years in pharmacy. Not about the Clothier report, however, but by the constant reiteration of all the old arguments about dispensing doctors during these past 37 years.

His points are fine, but Utopia will

not happen overnight or come about by divine right. We once had a monarch who lost his head due to his stubborn adherence to his belief in the divine right of kings in the face of the changing ideals of his subjects. Let not pharmacy lose its head wallowing in a plethora of rights to dispense, moans, mud slinging and odious comparisons between medical and pharmaceutical dispensing any longer. We have heard it all before; it has not achieved any results and I would have expected Mr Bubb to find this sort of activity even more depressing and boring after his 50 years than I do after my 37

In this town I have seen doctor dispensing extend from a mere trifle supplying private patients—to the present well-organised dispensing service running at a net ingredient cost value of over £7,000 per month, all at the expense of the four pharmacies here. As a former pharmaceutical committee secretary and member of the old Executive Council I have in the past been just as depressed as Mr Bubb, but with the help of the Clothier report I do feel that pharmacy now has a chance to reverse the past considerable growth in doctor dispensing. It will, however, be slow and will entail a lot of hard work from pharmacy. It will not be an improvement presented on a plate overnight. Your readers may recall that when writing in support of the concept of a standstill I stated that the juggernaught of doctor dispensing, if slowed down might even be reversed. The standstill has slowed the juggernaught down and intelligent use of the Clothier report might produce the desired reversal.

I can well appreciate Mr Bubb's disappointment with the Clothier report. All that hard labour has produced a small baby but, if not strangled at birth even babies grow and develop. I say give Clothier a chance!

Kenneth Smith, Spalding, Lincolnshire

Aim for monopoly

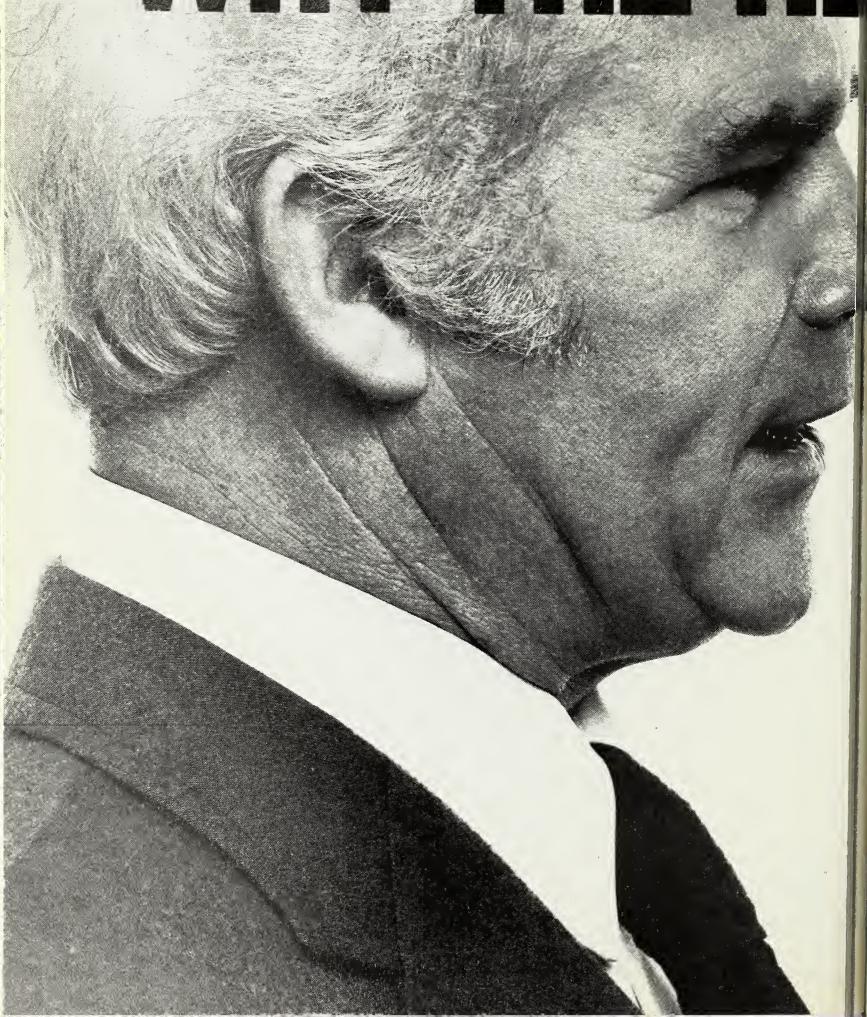
The fact that Parliament may find time to debate pharmacy closures presents us with a golden opportunity to obtain complete control over the sale and dispensing of medicines. This opportunity might not present itself again for a very long time.

A main cause of pharmacy closures is the fact that we are obliged to share our business with many other enterprises. It is not unreasonable for pharmacists to enjoy a monopoly in the sale of medicines, as they do in France, Germany, Holland, Belgium, Sweden, Norway, Finland, Denmark, Switzerland, etc.

Write to your MP now, and ask him to support our request for a monopoly, not only in the sale, but in the dispensing of medicines too. Write to your business address MP and your home address MP. You have nothing to lose, and everything to gain.

'Geraint Davies'
General Practice
Pharmacy Section, ASTMS

ISANATRA WALLETTER



IIIGPOLIGIA LISHOULD !

Under the Distributive Industry Training Board's new levy exemption scheme there'll be no levy remission at all for any firm which can't produce an adequate training policy signed by the head of the firm.

For the training policy statement is the vital first step in making your training system work and it must be communicated to all employees.

True, the signed policy statement only earns you a 5% remission. But it's the first 5%.

And without that first 5% there isn't any more, however excellent your other training practices may be.

So if, as head of your firm, you haven't yet signed a training policy meeting our minimum principles, we hope you won't mind this reminder.

. After all, if you're serious about training, a policy commitment to your staff is where it should start.

Your local D.I.T.B. training adviser will be pleased to help.

Distributive Industry Training Board

MacLaren House, Talbot Road, Stretford, Manchester M32 0FP. Telephone: 061-872 2494.

OPEN SHOP

Changing the layout helps combat theft

This is the second in a new series under the Open Shop title. Each article will be contributed by a member of a representative panel of retail pharmacists who will report on current trading activity in their own businesses. The article below comes from a proprietor pharmacist in a south coast resort.

Last week's C&D Sunglasses Supplement reminded me that 1977's summer season was not a success in my secondary (or tertiary) position near a popular seaside resort. The previous year's prolonged brilliance produced a phenomenal increase in holidaymakers enticed by the continental sunshine to explore beyond the immediate golden miles. Last year, far from being bewitched by the attractions of my particular parade, the poor visitors were driven from the front by the cold and drabness to patrol the heated big stores of the city centres.

As if warned by instinct, I did not buy any new sunglasses but signed up with Correna exclusively on the understanding I could show the quite large stocks carried over from last year. Overall sales were not marvellous but with only one small box of oldies left now, I have signed Correna for this year, for despite the blandishments of Goggles, Polaroid, etc, I think that with excellent discounts and guaranteed removal of unsold stock the odd lost sale can be borne without tears.

Similarly with sun preparations, I bought one Skol parcel, two Nivea parcels (missing Ambre Solaire entirely), taking Bergasol as virtually sole top product. Skol sold out, Nivea half sold and the odd dozen Bergasol was swapped for Endocil to be "promoted".

Alarming discovery

It was, incidentally, due to our method of counting sales of sunglasses by placing the price tags in the till drawer, that we had to recognise the alarming increase in shoplifting. When we came to pay for the stock replacements on the first journey we were dismayed to find a discrepancy of some £30 between gaps on the stand and the tickets from sales.

Now, four years ago I completed a refit with new front and open shelves, but being inherently resistant to change, kept the cash register on a counter at the back of the shop. Sales rose, but only 5 per cent above inflation. Eventually I called for help from the experts of the wholesale group who whizz-kidded my pharmacy into a self-service mini-bazaar—till by the door and a long gondola-divided shop in the classic grocery pattern.

This certainly achieved a gratifying increase in takings and turnover. Looking back, however, I think the result was mainly due to the stack of baskets put by the door which Pavlov'ed off the "basket reflex", induced by super-

market training (with only one little item lonely in the basket people tend to look for other items so as not to feel mean). We have found that this layout is almost impossible to supervise, for I certainly don't want staff sitting at a remote cash point when we are quiet or deliveries have to be put away.

The sunglass loss was the last straw, for it capped a month in which we discovered that some of our boxed Yardley perfumes no longer contained bottles, and a pair of binoculars were magicked from a glass-backed window display.

I called the staff together to spend an interesting morning rearranging fitments to form a centre island containing the cash register, and an unpacking area from which radiated various stands so that prospective purchasers would be sideways-on to my assistants. We ordered a couple of mirrors from the NPA who were good enough to provide us with some marvellous warning cards of the "Big Brother is watching you" sort.

To my relief the change doesn't seem to have affected takings, though the drop in cosmetic turnover has depressed the reps—Rimmel and Outdoor Girl having about halved. I don't know whether to laugh or cry, but think it best to preserve a straight face. We have few schoolgirl invasions now and have missed half-a-dozen familiars, some of long standing. But we see in this one of the few losses which is wholly welcomed!

Pharmaceutical Society of Ireland

Dublin Christmas rota 'not good enough'

The rota service over the Christmas holidays in Ireland, particularly in the Dublin area, was not good enough, believes Mr M. J. Shannon. At this month's Pharmaceutical Society of Ireland Council meeting he expressed surprise that there was no public outcry in the national Press.

Presenting the Practice of Pharmacy Committee report, Mr Shannon said the Irish Pharmaceutical Union had distributed rota-system cards and had given excellent advice but the service that should have been available was not evident. He felt there would have been a public outcry but for the small number of pharmacies who did open. It was agreed to arrange a meeting with the IPU to discuss rota and after-hours services in pharmacies.

The Law Committee noted with concern that reports are still indicating an alarming number of fatalities attributable to the ingestion of paraquat. In many cases it was not possible to say positively whether the deaths were accidental or self-induced. However, there could be no justification for complacency and it was agreed that stricter controls should be implemented by the Minister for Health, particularly in relation to the issuing of licences by County Councils to sellers of poisons.

The Department of Agriculture has asked the Society to nominate a pharmacist for the Consultative Committee under the Animal Remedies Act 1956. The Minister proposed to reconstitute the Committee for a further period and Section 4 (2) of the Act provides that

the Committee shall consist of five members, one of whom shall be nominated by the Minister for Health and the remaining four would be persons whom the Minister for Agriculture considered to have suitable experience in animal remedies. The Minister felt the Society should be represented. The president, Mr M. F. Walsh proposed and it was agreed Mr J. P. O'Donnell be re-nominated to the Committee.

Referring to the death of Mr M. L. Cashman (C&D, January 7, p6), member of Council and past president of the Society, Mr Walsh said it was a sad experience to attend the funeral of a close colleague. The occasion had been particularly poignant for him because of the close relationship he had enjoyed with Mr Cashman for the past 15 years. Mr Walsh paid tribute to Mr Cashman for the long and excellent service he had given to pharmacy and said he had helped to bring the profession to the status it had achieved today. Louis Cashman had been a strong, positive, intelligent and gentle person. Mr O'Donnell said that sometimes it was futile to attempt to give a picture of a man who contributed so much and who was liked so well-Mr Cashman was such a man. He was a good pharmacist and a credit to the profession. Mr O'Donnell praised Mr Cashman for his integrity, logical approach, clarity of vision and perception. Though an adopted Dublin man, Mr Cashman had remained a Kerryman at heart. It was fitting that the Society had awarded a fellowship to Mr Cashman since that was the highest accolade

at their disposal. Council members present joined with Mr Walsh and Mr O'Donnell in their tributes.

Mr Vincent Cronin, MPSI, co-opted to Council in December, was welcomed by Mr Walsh who said Mr Cronin was a young graduate who had already shown dedication and creativity in relation to his professional work. He had served on the Post-graduate Education Committee and given some of their lectures. Mr Cronin thanked Council for his co-option and said he was aware of the responsibilities that pharmacists owed to one another and to the public and he was anxious to see an increase in the Society's statutory powers to enable those ideals to be met.

Dr J. Deasy, chairman of the Post-graduate Education Committee told Council his Committee were providing courses on paediatric and geriatric medicines in the Dublin area during January, February and March. He hoped to see a large attendance. An advance grant was received from the Higher Education Authority for the new laboratory extension, now commenced, at the College of Pharmacy, 18 Shrewsbury Road, Dublin.

The registrar and secretary Mr M. J. Cahill, reported with regret the deaths of Mr R. N. Butler, MPSI; Mary J. O'Brien, MPSI; Mr D. O'Connell, MPSI and Mr J. Rowlette, Asst.

The following addresses were changed in the Register: M. B. Glennon, MPSI, 35 Dromartin Road, Dundrum, Dublin

14; Mrs O'Connell (nee Murnane), MPSI, 16 Broadford Lawn, Ballinteer, Dublin 14; P. P. Hayes, MPSI, 41 Newcastle Road, Galway; Mrs D. M. Leeman, MPSI, 8 Sandy View Drive, Riverside, Galway; M. J. Dorcan, MPSI, Knockalyre House, Downhill Road, Ballina, co Mayo. The name of Mrs T. O'Connell (nee Murnane), MPSI, was changed in the Register. Mr P. Needham, LPSI, and Mr J. Coffey, LPSI, were restored to the Register.

After the Licence Certificates of Bridget McEvoy, Ann Spratt and Ann Walsh were signed and sealed the following were nominated for membership: P. F. Coghlan, Main Street, Carrick-on-Suir, co Tipperary; B. McEvoy, Granard, co Longford; P. Needham, Feldberg, Upper Glenageary Road, co Dublin; A. Spratt, Slaney Place, Enniscorthy, co Wexford; D. Toomay, Sweet Briar Park, Waterford; A. Walsh, 136 Leinster Road, Rathmines, Dublin 6.

The following were elected members: C. Barry, V. M. Brennan, B. M. Daffy, P. J. Downey, M. B. Glennon, K. Harte, M. P. Hickey, P. D. Jacob, E. N. Jones, A. M. B. Lucey, C. M. L. Lynam, J. M. McEvoy, D. L. McKnight, E. M. Martyn, J. C. Meade, D. V. F. Morley, F. M. C. Mulvey, P. G. Murphy, J. M. O'Callaghan, H. B. O'Carroll, J. C. O'Donovan, K. M. O'Driscoll, M. A. O'Shaughnessy, M. de Sales Sheehan, M. J. Wade, P. M. P. Walsh, B. Stokes, J. A. Thompson.

BOOKS

Gardner's Chemical Synonyms and Trade Names, Eighth edition

Edited by E. I. Cooke and R. W. I. Cooke, *Technical Press*, Freeland, Oxford. $9\frac{3}{4} \times 6\frac{1}{4}$ in. Pp. 769. £17.50. As the title suggests, Gardner's is an alphabetical list of names, both proprietary and non-proprietary, and various synonyms. Where the manufacturer is known a key is given at the end of the entry to the Index of Manufacturers at the back of the book.

This edition of Gardner's contains about 3,300 new entries, mainly in the plastics, alloys and pharmaceutical fields, and nearly 400 names have been added

to the Index of Manufacturers. Several entries which were known to be no longer commercially available have been deleted and with these additions and deletions the scope of the eighth edition is 10 per cent greater than the seventh edition, published in 1971.

As in previous editions, a warning is given in the preface of the difficulties involved in the status accorded to names in Gardner. On one hand registrars sometimes take the view that because the name appears in Gardner, it must be of such general currency that its use cannot be restricted. Conversely, they may say that, as the name is not specifically stated to be a registered trade name—as happens when the editors of the book are not sure, then it is definitely not a registered trade name, though it may be so in some parts of the world.

ANNOUNCEMENT BY HILL'S PHARMACEUTICALS LIMITED

HILL'S BRONCHIAL BALSAM (Adult)

Hill's Pharmaceuticals Ltd. state that since early October 1977, they have supplied "new formula" against all orders. Direct customers, mainly wholesalers, have received a letter with each delivery pointing out the importance of correct stock rotation, and that the original formula should be sold before "new formula".

When part III of the Medicines Act comes into force on 1st February 1978, Pharmacists will only be able to supply the original formula against *bona fide* prescriptions. Pharmacists are strongly advised to check their stocks and ensure that any remaining old formula Adult Hill's Balsam is sold during January 1978.

Hill's Balsam Pastilles and Hill's Junior Balsam, however, are **not affected** by the changed legislation; and the "New Formula" Hill's Balsam may still be sold legally to the public in February 1978.

COMPANY NEWS

Wellcome exports rise by nearly half

Total group sales of £342m, more than 85 per cent of which were outside the UK, are reported by the chairman of the Wellcome Foundation Ltd, Mr A. J. Shepperd, in the accounts for the year ended August 27, 1977. This represents an increase of 18 per cent over the previous year.

Exports from the UK at £73m showed an increase of more than 44 per cent on the previous year and 66 per cent in the last two years. Group profits before taxation increased from £41.4m to £46.3m. Capital investment during the year was £21m, of which £10m was in the UK.

All regions of the group contributed to the increase in sales. "Particular credit," says Mr Shepperd, "attaches to the management in Australasia and Pakistan for the continued development of their businesses. The improvement in trading does not stem from movements in exchange rates, the effect of which in this respect was negligible."

During the year £29m was spent on research and development. Scientific achievements included the identification of prostacyclin and work with Menoctone, the first substance showing therapeutic activity against the organism causing East Coast fever.

An agreement has been concluded with Syntex Corporation under which Wellcome will manufacture and market the broad-spectrum animal anthelmintic oxfendazole. Advances in the pesticide and insecticide markets are expected



Mr Phillip Saint, managing director of Tiffany Cosmetics Ltd (left) with Mr Ian Campbell, managing director of Fulford Williams UK division (See story above right).

from Permethrin, which has been developed by the company under licensing arrangements from the National Research Development Corporation and is to be launched during 1978.

MSD to form new drugs division

Merck Sharp & Dohme Ltd are planning to form a new marketing and selling division, to be known as Thomas Morson Pharmaceuticals. The main concern of the division initially will be the launch of a major new product, which is being supported by an investment of £15 million in the UK.

The entire share capital of Thomas Morson & Son Ltd was acquired by MSD in January 1957, and the trading title was retained after Morson ceased to trade in inorganic chemicals at the end of September 1972.

Fulford-Williams buy Tiffany range

The complete range and goodwill of Tiffany Cosmetics Co is being bought by Fulford-Williams (International) Ltd. Philip Saint, who built the Tiffany business, has signed a long contract with the company to act as an executive marketing consultant for the Tiffany range, while devoting more time to his other companies including Component Conversion Ltd/Staff Incentives. He said of the takeover: "Tiffany so exceeded my expectations that management and services are stretched to the utmost, we had to continue to grow and that needed the back-up of a bigger company".

Briefly

Revion: The telephone number has been changed to 01-629 7400.

John Hogston Associates Ltd, who publish quarterly reviews of the cosmetic and toiletries market, regularly reviewed in C&D, have moved to 23 Golden Square, London W1.

Spectra Automotive and Engineering Products Ltd have been appointed UK manufacturing licensee for AMCO Force Chemicals Division, American Solder & Flux Co Inc, and will manufacture fluxes for tin cans used in the food and pharmaceutical industries.

Hickson & Welch (Holdings) Ltd report sales of £68.1m in the year to September 30, 1977 (£54.4m in the previous year) and pre-tax profit of £10.1m (£7.9m). The directors recommend that the authorised share capital be increased from £3.7m to £12.6m by the creation of 17.9m new ordinary shares of 50p each.

APPOINTMENTS

Laporte Industries Ltd: Mr T. D. Collier has joined the company as general manager, medicines and toiletries group. Nicholas Laboratories Ltd: Mr John Alway, has been promoted to product marketing manager, toiletries division, and will have responsibility for Radox Showerfresh and Matey.

United Glass Ltd: Following the retirement of Mr John Bradbrook, group finance director, Mr Brian Moorhouse, at present group administration director, has been appointed group finance and administration director.

Avery Label Systems: Mr Tom O'Loughlin has been promoted to the new post of field sales manager to take charge of the national sales team. Mr Tony Godfrey and Mr Bill Hamilton become key account salesmen.

Wella (Gt Britain) Ltd: Mr Tony Barnett has been appointed data processing and O & M manager. He has previously been with a number of international companies including BASF (UK) Ltd, Philips Electrical Ltd, and Hoover Ltd.

Rockware Group Ltd: Mr Charles I. Ball, FCA, has been appointed to the board as a non-executive director. He is a director of several companies, and until November 1977 was chairman of Barclays Merchant Bank Ltd and a director of Barclays Bank Ltd.

New Era Laboratories Ltd: Mr W. J. Dowling has been appointed sales representative covering north London and northern home counties. Mr Miles F. Drake has been appointed export development manager with special responsibilities for Europe, the Middle East and Africa.

COMING EVENTS

Sunday, January 22 Chiltern Region, Pharmaceutical Society, Queen Elizabeth II Hospital, Welwyn Garden City, at 10 am. Postgraduate course on "Ages of man 2: infancy".

Monday, January 23
Enfield Pharmacists' Association, Postgraduate medical centre, Chase Farm Hospital, Enfield, at 7.45 pm. Miss M. Tomison (Society's head of publicity) on her work.

North Metropolitan Branch, Pharmaceutical Society, Presbyterian Annexe, Wakefield Street, School of Pharmacy, London, WC1, at 7.30 pm. Members' evening on branch representatives meeting. Note—not on Tuesday, January 23, as announced in circular.

Tuesday, January 24

Bristol Branch, Pharmaceutical Society, Edward Jenner Centre, Bristol Royal Infirmary, Bristol, at 7.30 pm. Mr P. Bull (senior ENT registrar) on "Self medication in diseases of the ears, nose and throat".

Fife Branch, Pharmaceutical Society, Ollerton

Fife Branch, Pharmaceutical Society, Ollerton Hotel, Kirkcaldy, at 7.45 pm. Mr W. R. D. McIntyre (medical photographer) on "Medical photography in diagnosis and treatment". Fylde Pharmacy Forum, Imperial Hotel, Blackpool,

Fylde Pharmacy Forum, Imperial Hotel, Blackpood at 7.45 pm. Mr M. McGrath (Preston Pricing Bureau).

Wednesday, January 25

Scottish Department, Pharmaceutical Society, Police headquarters, Fettes Avenue, Edinburgh, at 7.45 pm. Chief inspector Elliott on "Security".

Sunderland Branch, Pharmaceutical Society, Lecture theatre, new library building, Sunderland Polytechnic, at 8 pm. Dr I. Haslop (consultant rheumatologist) on "Nature and treatment of rheumatoid arthritis".

Thursday, January 26

Huddersfield Branch, National Pharmaceutical Association, Spotted Cow Hotel, New Hey Road, Salendine Nook, Huddersfield, at 8 pm. Mr K. R. Rutter on "Why do we need NPA?".

Liverpool Branch, Pharmaceutical Society, Centre Hotel, Lord Nelson Street, Liverpool, at 8 pm. Evening with Society's president, Mrs Estelle

Northern Scottish Branch, Pharmaceutical Society, Postgraduate centre lounge, Raigmore Hospital, Inverness, at 7.45 pm. R. Stewart on "Highland Health Board".

Friday, January 27

Croydon Branch, Pharmaceutical Society,
Greyhound Hotel, Park Lane, Croydon, at 8 pm.
Dr B. Boeree (Merck, Sharp & Dohme Ltd) on
"Hypertension".

Sunday, January 29

Chiltern Region, Pharmaceutical Society, Luton and Dunstable Hospital, Luton, Beds, at 10 am. Postgraduate course on "Common clinical problems".

Advance information

Society of Cosmetic Chemists of Great Britain.
Dinner and dance. February 10, Hilton Hotel,
Park Lane, London W1, at 7.15 pm for 8 pm.
Tickets (£11 per person) from general secretary,
Society of Cosmetic Chemists of Great Britain,
56 Kingsway, London WC2.

Chemicals distribution: Conference by Chemical Industries Association, National Exhibition Centre, Birmingham, February 15 and 16. Fee £95 including accommodation and meals. Details CIA distribution department, Alembic House, 93 Albert Embankment, London SE1.

Yorkshire Region, Pharmaceutical Society:
Symposium on Clothier report, February 19, at
2.15 pm, Yorkshire Regional Health Authority
headquarters, Park Parade, Harrogate.
Frankturt International Fair: February 26-March 2.
Details from Frankfurt Fairs, 120 Arthur Court Details from Frankfurt Fairs, 120 Arthur Court, Queensway, London W2.

Postgraduate courses on the physiology of the endocrine system, March 21 to 23 and September 5 to 8 at Varley Hall of Residence, Coldean Lane, Brighton. Further information from Dr R. W. Daisley, course tutor, department of pharmacy, Brighton Poytechnic, Moulsecomb, Brighton.

Postgraduate school on aspects of drug toxicity. April 3 to 7. Course (£110) to be held at department of pharmacy, Chelsea College, Menresa Road, London SW3. Application forms from Mr R. E. Marshall, school secretary, Department of Pharmaceutical Sciences, Pharmaceutical Society, 1 Lambeth High Street, London SE1.

Border Region, Pharmaceutical Society: Regional conference, April 27, at 7 pm, Langley Hall Hotel, Carlisle. Postgraduate course for general practice pharmacists on recent advances, May 7, 14, 21, at 10 am, Sunderland Polytechnic.

Satety and industry: Union Internationale des Laboratoires Independants symposium, November 1-2, Assembly Rooms, Bath, Avon. Details from Mr A. Herzka, Ashbourne House, Alberon Gardens, London NW11 0BN.

EWT and ENPOCON: Joint exhibitions on effluent and water treatment, and environmental pollution control, November 13-18, National Exhibition Centre, Birmingham.

MARKET NEWS

Chinese menthol takes a tumble

London, January 18: Chinese menthol for forward delivery took a further tumble in price during the week, and the size of the fall provided the only feature in the market. In about two weeks the kg rate has fallen from £9 to £7.15, cif. Spot material had been discounted against an expected fall so has not moved yet but unless there is a sudden turn around of prices at origin further reductions in spot rates must be inevitable. Among the reasons for the lower prices are the stronger pound and recent activity by sellers of synthetic material. Brazilian menthol although exempted the import duty levied on Chinese material is not competitive at this week's levels.

Among botanicals the following were reduced in price; aloes, balsams, cinnamon, dandelion and gentian roots, lemon peel, ipecacuanha and Russian liquorice and a number of aromatic seeds. Dearer were cascara, cherrybark, hydrastis, Jamaican sarsaparilla and witchhazel leaves.

A few essential oils were marginally

Pharmaceutical chemicals

Amylobarbitone: Less than 100-kg lots £10.57 kg; sodium £11.71.

Ascorbic acid: (Per kg) £6.94; 5 kg £5.94; 25-kg £5.44 sodium ascorbate, as for the acid; coated, £7.14, £6.14, £5.64 respectively. Calcium ascorbate £7.49, £6.49, £5.99 respectively for same quantities. Butabarbital: Acid and sodium £16 kg for 50-kg. Butobarbitone: Less than 100 kg £13.70 per kg. Cyanocobalamin: £3.39 g; £2.39 g in 100-g lots. Cyclobarbitone: Calcium £15.39 kg in 25-kg lots. Dexpanthenol: (Per kg) £11.61; 5-kg £10.61.

Dextromethorphan: £156.20 kg; £155.20 kg in 5-kg. Dihydrocodeine bitartrate: £535 kg in 20-kg lots: Subject to Misuse of Drugs Regulations. Nicotinamide: (kg) £5.71; £4.71 (5-kg); £3.96 (50-kg). Amylobarbitone: Less than 100-kg lots £10.57 kg;

Nicotinamice: (N9) (50-kg).
(50-kg).
Nicotinic acid: £5.71 kg; £3.96 kg in 50-kg lots.
Noscapine: Alkaloid; £31.85 kg for 25-kg lots; £30 kg for 100-kg. Hydrochloride £35.65 and £33 kg for similar quantities.

Crude drugs

Aloes: Cape £1,150 ton spot; £1,050, cif. Curacao £2,300, cif nominal.

Balsams: (kg) Canada: easier at £11.30 spot; £11.10 cif. Copaiba: £1.90 spot; no cif. Peru: £6.05 spot; £5.90 cif. Tolu: £4.40 spot.

Belladonna: (metric ton) Leaves £2.10 kg spot, £2 cif. Herb and root. No offers.

Benzoin: Block £102 cwt spot; £101, cif.
Buchu: Rounds £1.95 kg spot; £1.80, cif.
Camphor: Natural powder £5.15 kg spot; and cif.
Cascara: £1,050 metric ton spot; £1,020, cif.
Cardamom: Alleppy green £9 kg. cif.
Cherry bark: spot £1,080 metric ton; £1,050, cif.
nominal. nominal.

Chillies: New Guinea birdseye £2,000 metric ton.

Cinnamon: (cif) Seychelles bark £425 metric ton.

Ceylon quills 4 o's £0.79 lb; featherings £310 metric ton.

Cloves: Madagascar or Zanzibar £3,600 metric ton.

Cochineal: Peruvian silver-grey £15 kg spot; £14.50, cif. Tenerife black £17.50, cif.

Dandelion: Spot £1,400 metric ton spot; £1,350,

Dandelion: Spot £1,400 metric ton spot; £1,350, cif.

Ergot: Portuguese-Spanish £1.80 kg spot; £1.40, cif.

Gentian: Root £1.40 kg spot; £1.37, cif.

Ginger: Cochin new crop £965 metric ton, cif

(Jan/Feb), Jamaican withdrawn: Nigerian split

£1,150 spot; peeled £1,500 spot.

Honey: (per metric ton in 6-cwt drums, ex-warehouse) Australian light amber £660; medium £640;

Canadian £810; Mexican £617.

Henbane: Niger, £1,010 metric ton spot; £990 cif.

Hydrastis: (kg) £10.40 spot; £10.30, cif.

Ipecacuanha: (kg) Costa Rica £9.80 spot, £9.75 cif.

Jalap: Brazilian no spot; shipment £1.30 kg, cif.

Kola nuts: £430 metric ton, cif, nominal.

Lanolin: BP in 1-metric-ton lots £0.92 per kg.

Lemon peel: Unextracted £1,350 metric ton spot;

shipment, £1,300, cif.

Liquorice root: Chinese £400 metric ton cif. Russian
£340 spot; £335, cif, new crop. Block juice £147 ped
100-kg spot. Iranian spray-dried £1.65. Mexican 15%
£1.655, cif, nominal.

100-kg spot. Iranian spray-dried £1.65. Mexican 15% £1.65. cif, nominal.

Lobelia: American £1,210 metric ton spot; European £1,100 spot; £1,080, cif, shipment.

Lycopodium: Russian £5.20 kg. cif. Indian £4.50 Mace: Grenada unsorted £2,100 ton, fob.

Menthol: (kg) Brazilian £8.35 spot; and cif. Chinese £8.70 in bond £7.15, cif.

Nutmeg: (per ton) Grenada 80's £1,600 spot; unassorted £1,450; defectives £1,190.

Nux Vomica: No spot; forward £250 metric ton, cif.
Pepper: (ton, cif) Sarawak black £1,370 spot; £1,260, cif; white £1,830 spot; £1,710, cif.

Pimento: Jamaican £1,050 metric ton, cif.
Podophyllum: Root metric ton, cif, nominal.

Quillaia: Spot £1.15 kg; £0.95, cif.
Rhubarb: Chinese rounds 60 per cent pinky £4.00 kg, cif.

Rhubarb: Chinese rounds 60 per cent pinky £4.00 kg, cif.
Sattron: No offers.
Sarsaparilla: Mexican £1.65 kg, cif; no spot Jamaican £1.90 spot; £1.87, cif.
Seeds: (metric ton, cif) Anise: China star £880 nominal. Caraway: Dutch £870. Celery: Indian £600 (new-crop). Coriander: Moroccan £630; Indian £480. Cumin: Egyptian £1,030; Turkish £1,040 Iranian £1,100. Dill: £180. Maw £540.
Senega: (kg) Canadian £14 spot; £13, cif.
Senna: (kg) Alexandria pods, hand-picked scarce at form £2, hp, upwards; manufacturing £0.65. Tinnevelly leaves No 3, £0.27; pods; faq £0.27 hand picked £0.40 ex warehouse.
Squill: Italian new crop £650 metric ton, cif. Indian £240, cif.

Squill: Italian new crop £650 metric ton, cir. Indian £240, cif.
Styrax: Turkish natural £4.20 kg spot, £4, cif nominal.
Tonquin beans: £4.10 kg spot, no shipment offers. Turmeric: Madras finger £830 ton spot; new-crop for shipment not offering.
Valerian: Pakistan root £1,280 metric ton spot; £1,250 forward; European £2,000; £1,950 forward. Witchhazel leaves: Spot £3 kg; £2.90, cif.

Essential oils

Bois de rose: Spot £7.50 kg; shipment £7, kg. Cedarwood: Chinese £1.20 kg spot; £1.35, cif. Citronella: Ceylon £1.45 kg spot and, cif; Chinese £2.10 spot; and cif.
Eucalyptus: Chinese £2.10 kg spot and cif.
Lemongrass: Cochin £5.40 kg spot; £4.80, cif. Peppermint: (kg) Arvensis—Brazilian £4.50 spot; Shipment £4.50, cif. Chinese £4.30 spot; £4.15, cif, Piperata, American Far-West from about £22, cif. Sassatras: Brazilian £2.20 kg spot and cif. Chinese unavailable.

unavailable.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press.

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Circulation ABC January/December 1976: 14,510.

Appointments

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£7000 Minimum + car

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